# IHCP bulletin

This bulletin has been updated to remove instructions on completing the W-9. See the Provider Enrollment provider reference module for that

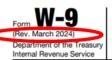
INDIANA HEALTH COVERAGE PROGRAMS

BT202564 MAY 20, 2025

## **IHCP** requires providers to submit most recent version of W-9 form with enrollment transactions

The Internal Revenue Service (IRS) periodically updates the W-9 form. The most recent revision is posted on the IRS website and is dated March 2024 (see Figure 1). Beginning July 1, 2025, the Indiana Health Coverage Programs (IHCP) will require providers to use the most recent version of the W-9 form for all provider enrollment transactions. Any previous version of the W-9 form (dated October 2018 or earlier) will be returned to the provider for corrections.

Figure 1 – Most recent version of IRS W-9 form with March 2024 date



### **Request for Taxpayer Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

Give form to the requester. Do not send to the IRS.

Before you begin. For guidance related to the purpose of Form W-9, see Purpose of Form, below.

- Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)
- 2 Business name/disregarded entity name, if different from above.

#### QUESTIONS?

If you have questions about this publication, please contact Customer Assistance at 800-457-4584.

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